

*Fee  
Changed*



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

JONATHAN N. HOWARTH

APPLN. NO.: 10/029,329

FILED: DECEMBER 21, 2001

MICROBIOLOGICAL CONTROL  
IN POULTRY PROCESSING

GROUP ART UNIT: 1761

EXAMINER: CAROLYN A. PADEN

Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

Sir:

This is in response to the Office Action dated April 13, 2004.

Amendments to the Claims begin on Page 2 of this paper.

Remarks begin on Page 7 of this paper.

A terminal disclaimer to obviate double patenting rejection over US 6,565,868 is attached, together with authorization to pay the proper fee therefor.

A Fifth Supplemental Disclosure Statement is attached together with authorization to pay the proper fee therefor.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

## CLAIMS AS FILED - PART I

(Column 1)		(Column 2)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))				\$	OR		\$
TOTAL CLAIMS (37 CFR 1.16(c))	66 minus 20 =	46	X \$		OR	X \$	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	1 minus 3 =	2	X \$		OR	X \$	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+	\$	OR	+	\$
			TOTAL		OR	TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2.

## CLAIMS AS AMENDED - PART II

(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	*	Minus	**	X \$		OR	X \$	
Independent (37 CFR 1.16(b))	*	Minus	***	X \$		OR	X \$	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+	\$	OR	+	\$
				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	*	Minus	**	X \$		OR	X \$	
Independent (37 CFR 1.16(b))	*	Minus	***	X \$		OR	X \$	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+	\$	OR	+	\$
				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	*	Minus	**	X \$		OR	X \$	
Independent (37 CFR 1.16(b))	*	Minus	***	X \$		OR	X \$	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+	\$	OR	+	\$
				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.